

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LJ	5353	10/26/00
RESPONSE FORMALITY REVIEW		7162	3/25/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (through numeral) ... Canceled  
 ÷ ..... Rescinded

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Standard

Claim	Final	Original	Date
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11			
12			
13	✓	✓	✓
14	✓		
15	✓		
16	✓		
17	✓		
18	✓	0	>✓
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Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
53	✓	✓	
54	✓	✓	
55	✓	✓	
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57	✓	✓	
58	✓	✓	
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63	✓	✓	
64	✓	✓	
65	✓	✓	
66	✓	✓	
67	✓	✓	
68	✓	✓	
69	✓	0	>✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

**BEST AVAILABLE COPY**

Claim	Date
Final	Original
85/51	12/9
90/52	1/3
81/53	1/3
89/54	1/6/86
90/55	
91/56	
92/57	
92/58	
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94/60	
95/61	
96/62	
97/63	
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133/99	
134/00	

Claim	Date
Final	Original
125/01	12/9
126/02	1/3
127/03	1/3
128/04	1/3
129/05	1/3
130/06	1/3
131/07	1/3
132/08	1/3
133/09	1/3
134/10	1/3
135/11	1/3
136/12	1/3
137/13	1/3
138/14	1/3
139/15	1/3
140/16	1/3
141/17	1/3
142/18	1/3
143/19	1/3
144/20	1/3
145/21	1/3
146/22	1/3
147/23	1/3
148/24	1/3
149/25	1/3
150/26	1/3

Claim	Date
Final	Original
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